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**Page 1 of 14**

**Urgent**

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**Date: 20-Apr-07**

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**From:    Fax:    M/S:**  
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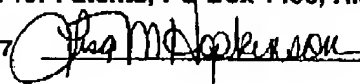
**Subject:**  
**Application No.: 10/728,553; Inventor: Farid Adrangi, et al.**  
**Filed: 12/04/2003    Docket No. P17493**

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**Date: April 20, 2007**



**Included in this transmission:**

**Fax Cover Sheet (1 page)**  
**Transmittal Form (1 page)**  
**Petition for Extension of Time (1 page submitted in duplicate)**  
**Amendment (10 pages)**

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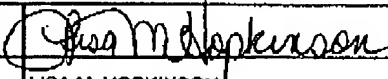
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<b>TRANSMITTAL FORM</b>	
<i>(to be used for all correspondence after initial filing)</i>	
Application Number	10/728,553
Filing Date	12/04/2003
First Named Inventor	Farid Adrangi
Art Unit	2617
Examiner Name	Contos, Joy Kimberly
Attorney Docket Number	P17493
Total Number of Pages in This Submission	14

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax Cover Sheet
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Firm Name	INTEL CORPORATION		
Signature	/ Michael R. Barre /		
Printed name	MICHAEL R. BARRE		
Date	APRIL 20, 2007	Reg. No.	44,023

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Typed or printed name	LISA M. HOPKINSON
Date	APRIL 20, 2007

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